SOUTH BRUNSWICK TOWNSHIP

*PLEASE SUBMIT ONE FORM FOR **EACH** BLOCK & LOT TO BE SEARCHED*

REQUEST TO: TAX SEARCH OFFICER IN TAX COLLECTOR'S DEPT. DATE:_____BLOCK___LOT__ QUAL.____ADD'L LOT____ OWNER: PROPERTY ADDRESS: REQUESTED BY: We hereby certify that the status of this property is as indicated below as of_____ LIENS: PAID UNPAID NOT YET DUE NOT APPLICABLE 20 ___Taxes 1st Otr 2nd Qtr 3rd Otr 4th Qtr Tax Sale Certificate Added Assessment Added Omitted ____ Rollbacks (YRS) Improvement Assess. Water & Sewer ACCT.#____ Follow up Phone Call_______Date_____

SEND TO THE PLANNING DEPARTMENT UPON COMPLETION